

Linda Clair
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FILE 3C – Monday afternoon discussion

Linda: So, if all else fails, try the counting. And even that might not work at times, but you do need to persevere with it, particularly if you're feeling a bit foggy or tired. It can just add that extra bit of structure to the sitting. But you need to do it from your body, your breath in the abdomen. So, you breathe in through the nose and as you breathe out, on the outbreath – of course it's not coming out through the abdomen, but your attention goes down there to that movement of the abdomen with the breath – and you count down there. It's amazing the number of thoughts you can have between numbers. It makes you see and realise how fast the mind can be, how unconscious thinking can be, and there are different levels of it. So, I'd say, when you are feeling foggy and murky, really make that effort, and it does take an effort, to count.

So, you can feel the aim of sitting is to have no thoughts, but if you aim for that you are going to be often disappointed. The aim is to come back to your body, to your breath, whatever – be in your body as much as possible. What eventually happens is that there is almost no desire to think anymore – to think, to remember, to daydream. Because now, being here, is incredibly interesting when you're not thinking. So, the desire to be here needs to gradually become stronger than the desire to think. And sometimes it takes more effort to sit and watch than to get involved in something, involved in a thought.

You want to say something? You look like you're about to say something.

Question: Yes, I guess just a report on my experience. I feel like it's going okay so far, like a continuation of my practice at home. Mainly, I feel, I'm seeing the thoughts and there's a stronger desire to come back into the abdomen. And really feeling the abdomen from down in the abdomen, so I'm trying to stay down there as much as I can. That can feel quite exhilarating at times because I notice these thoughts that I get caught up with, and they're quite attractive.

Linda: Yes, like they're saying, "Come with me."

Question: Yes, "Come with me and check this out." But there's a stronger pull to come back, and noticing later on that I actually dropped that and I'm here now. I feel like it's the potential of that which is kind of exciting – that it's possible to drop. But then there are other stronger feelings that come up, like even now when I was going to say something, quite a strong initial anxiety. I tried to stay in the abdomen as much as I can in that situation as well, because I feel like it's not really real. Because it's there and then it's gone, and I'm still here. But when it's there sometimes all I can do is sit with it

and I see it, and try to remain as neutral as I can, but sometimes there is the tendency to pull myself away from it and down into the abdomen to the point of it being resistance to experiencing this.

Linda: It's a fine line, but it is so tempting to get into it. So, there's a fine line between repressing it, and using the breath as an escape, or just to be in your body to extricate yourself from that emotion and come back to where you are. It can take such an effort to do that, but also, it is exhilarating when you see that it is possible to do that. And the exhilaration is that you're not being controlled by something. It doesn't mean you're in control – that's different – but you start to feel more empowered. Not that you're trying to control something, you're not trying to control the mind, you just want to be *here*. And that is very empowering, to see that it is possible not to be controlled by this entity, this thing, that we create and feed and keep feeding.

Once you start to sense that possibility and, like you said, potential it's incredible because this is all about realising your potential – what real intelligence is, what real presence is, what reality is. And you can realise that while you're still in the body, and then there's not this fear of death, there's not this attachment to the body – "I've got to hold on." But the thing is, we think so that we're not in the body. Because we're so scared, and so attached to the body, we're doing the opposite – we're trying to get out of it and pretend that it's going to last forever, we can think our way out of it. But you do the opposite – you come in – and you can get scared doing that at times, and it's hard. And you do tend to feel with this practice as you go on it's going to get easier, but it doesn't, it gets more challenging; I say that rather than harder, but it doesn't become easier. It becomes more interesting, more challenging, more exciting, but it still takes a lot of effort.

So great, really good. Keep doing what you're doing.

Question: Yes, I feel like one difference that I'm noticing is that, in the past, I've really used physical pain to remain present. I've felt that has pulled me into the moment and forced me to be here. A difference that I'm seeing is, that decoupling from my thinking is less of a forceful thing. I see myself doing it without as much pain in my body.

Linda: That's good. That means it's becoming more natural to be in your body and that resistance to being in your body is less. It doesn't mean you won't feel pain at times – it will come up off and on. It can be there until the end of the resistance.

Question: I've been doing some longer sits and feeling pain in my body and I still noticed the value – like I feel like it really pulls me in – but at the same time I notice this ability to see the thought, come back. And there is a strength in (doing) that without having the pain. Would you recommend that I practice that a bit more or do a little bit of both?

Linda: Yes, do a bit of both, but you've got no control over the pain. But you mean the longer sits? Do them sometimes but don't necessarily feel that the longer you sit the better. Sometimes it's good to sit for a few hours, other times not, it's not the right time. So don't get attached to that, to feeling you need to do that. But during this retreat sometimes do that. You will definitely bring out, leach out, more.

You do start to see that the pain is not going to be there all the time and you can be in this state where you are free from that control, and it's not necessarily painful. It won't be in the end – the pain just goes, the resistance goes.

So sometimes it might feel a bit hard to talk in front of people but I encourage you to do it if you feel like talking about what's happening. It doesn't need to be a question. It can just be talking about how you're feeling. Most people are a bit nervous about it.

How are you M.? You've been so quiet it's almost like you're a ghost going around.

Question: I'm not sure, it's just felt different in some way. In some way there's been a lot churning around but there's something else going on as well. I don't know. A few days before the retreat – and this is gruesome information that most people don't need to hear – I passed a kidney stone. It had been going on for a few weeks with a lot of pain and low energy, but also churning through stuff and feeling pretty down. But then that happened and something else passed with it as well, it was really strange. So, I think I've been a bit tired since that. I've been really feeling the cold a lot, and noticed my thoughts were coming up to almost stop me from feeling cold, but more than usual. The night before I passed that kidney stone I've never felt so cold before. I was wrapped up in electric blankets and huge doonas and I still felt I wasn't warm enough.

Linda: But you haven't got sick? Sometimes you can feel that when you're not feeling so well, so strong? Could be that, could be a bit of detachment. You can feel that icy cold where you just can't get warm.

Question: I'm not really sure what I'm saying but today I went for a walk, and something about the conversations I've been listening to, and these thoughts that had always grabbed my attention. For some reason I felt like I wanted to fortify myself in my belly and in my body. It felt like an intention in some way. And those thoughts – not necessarily dropped away but something else is happening. More broadly, I'm not really sure what's going on.

Linda: Well, that's a good thing.

Question: I'm not so bothered by it either.

Linda: Yes, because you don't know what's going on, I don't know what's going on – nobody does.

Question: It's been really interesting hearing those conversations here and how many of them really hit home. So, I'm just cracking on as best as I can.

Linda: Just keep going. There's another couple of days for you so just keep going.

How are you D.?

Question: It's been very, very emotional, incredibly emotional. What you said this morning about not blaming anybody and taking responsibility – I felt that I don't really blame hugely, but the responsibility I hadn't really grasped. And what I realise is in my practice at home, and at the beginning here, I've allowed incredibly emotionally charged thoughts to be just running and not coming back to the body, and not breaking it in any way. I got that this afternoon that I need to be much more responsible for myself in that sense. And the thinking, it's anaesthesia constantly, and then you get a tiny glimpse out of the anaesthesia but it's too late, it's there again. But this afternoon has been clearer. I've been able to see the thinking before it's created another wave of emotion in me, so I've felt I've had patches this afternoon of feeling the possibility of that, the potential of that responsibility.

Linda: Good, very good. So, for the next twenty-four hours what I want you to do in particular is to try to talk – and I'm not saying you're talking a lot, but there have been periods where – talk as little as possible. Keep everything in you. If you become emotional, upset, go to your room, have a cry, and then come back again. Don't go to anyone wanting sympathy; and again, I'm not saying that you do that, but a lot of us tend to do that. Specially we women do that. We want – “Oh, you poor thing, it's alright.” So, I don't want you to do that, I want you to be quiet – not hard, just soft.

And if you feel emotional, the advantage we've got as females is we can cry much more easily than men. Men find it much harder to cry because they're taught not to, whereas we're allowed to, in general I mean. So do that. I used to cry a lot, but I'd usually go to my room, have a cry, do it in private. So do that and then come back and keep sitting. And just be as quiet and contained as you can be. Just go about your day doing things – just what you need to do, nothing extra. No working out better ways to do things, just keep it simple!

Question: Yes, got it.

Linda: Just accept things as they are, everything is running smoothly – so far. So good, really good.

Question: I still have the feeling that more is better.

Linda: More sitting? More what?

Question: Yes, trying, working. These last couple of days I sat both the afternoons as well. More as a sort of experiment to see what would happen, and it's okay. Is that okay to go on, or should I consciously get up and break that?

Linda: So you're sitting right through the morning?

Question: Yes, through the morning and through the afternoon.

Linda: No, I feel don't sit through both. Get up and do the walking. Just sit for half-hour blocks and get up and do the walking.

Question: I've enjoyed seeing that it can be done.

Linda: See that it can be done but that doesn't mean you do it every time. You can get quite attached to something like that. I'd say, sitting in the morning for that long is enough, and in the afternoon break it up a bit, and be particularly vigilant with your walking. It's good to challenge yourself, see what you can do. But it's true, more – it's not always the right thing to do. You need to chop and change a bit and not see getting up as a weakness. It's not that.

Question: I think there's a residue of that thought pattern.

Linda: Well, it's probably from your upbringing I'd say, (laughter) as it is in all of us in different ways.

Question: This afternoon I had this pain – well, I have had since I've been here most of the time, in my chest and a little bit in my back. And I thought, "Surely there's something I can do about this pain," and I started to do some very deep breathing, and the pain went. So I was quite pleased with that and I did that through this last section. But then I was moving because of the deep breathing.

Linda: That's okay, do that. You have to breathe so you are going to move when you breathe. How did you feel after?

Question: Lovely.

Linda: Great, so keep doing that.

Question: It's hard to everything that you have to do at the same time. (Laughter) And I do hardly any of them, but I will see how this goes.